# APPLICATION FOR EMPLOYMENT

MENASHA POLICE DEPARTMENT 430 First Street Menasha, WI 54952

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

	(F	PLEASE PRINT)			
Position(s) Applied For		10007	Date of Ap	plication	
How Did You Learn About Us?  Advertisement Employment Agency	☐ Friend ☐ Relative	☐ Inquiry ☐ Other	101	7- h	
Last Name	First Name		Middle Name		
Address Number	Street	City	State	Zip Code	
Telephone Number(s)			Social Security Number	r	
Best time to contact you at	home is:				AM PM
If you are under 18 years of proof of your eligibility to ver Have you ever filed an apple of Yes, give date	work? lication with us befor			☐ Yes	□No □No
Have you ever been employ If Yes, give date				☐ Yes	□No
Do any of your friends or relations	977			☐ Yes	□No
Are you currently employed	d?			☐ Yes	□No
May we contact your prese	nt employer?	ψ:		Yes	□No
Are you prevented from lav country because of Visa or Proof of citizenship or immi	Immigration Status?			Yes	□No
Date available for work	/	Vhat is your desire	d salary range?		
Are you available to work:	Part Time (P		3 shift) ngs Afternoon Evenings) vailable/	<b>/</b> )	
Are you currently on "lay-o	off" status and subjec	t to recall?		☐ Yes	□No
Can you travel if a job requ	ires it?			☐ Yes	□No
	WE ARE AN EQ	UAL OPPORTUNI	TY EMPLOYER		

### **EDUCATION** Years Diploma / Name and Address School Course of Study Completed Degree of School **High School** Undergraduate College Graduate/ **Professional** Other (Specify) WORK EXPERIENCE Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. **Dates Employed Employer Work Performed** From Address Telephone Number(s) **Hourly Rate/Salary** Starting Final Starting/Present Job Title Supervisor ☐ Yes ☐ No Reason for Leaving May We Contact? **Dates Employed Employer Work Performed** From Address Telephone Number(s) Hourly Rate/Salary Starting Final Starting/Present Job Title Supervisor ☐ Yes ☐ No Reason for Leaving May We Contact? Dates Employed **Employer** Work Performed From To Address Telephone Number(s) **Hourly Rate/Salary** Starting Final Starting/Present Job Title Supervisor Reason for Leaving May We Contact? ☐ Yes ☐ No Dates Employed **Employer Work Performed** From To Address Telephone Number(s) Hourly Rate/Salary Starting Starting/Present Job Title Supervisor Reason for Leaving May We Contact? ☐ Yes ☐ No Comments: Include explanation of any gaps in employment.

Describe any specialized training, apprenticeship, skills and extra-curricular activities.	₹.
	NAME
	iii
Describe any job-related training received in the United States military.	
List professional, trade, business or civic activities and offices held.	
You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:	
ADDITIONAL INFORMATION	P
Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience.	SO
	Ĭ
	POSITION:
	<i>:</i> -

# SPECIALIZED SKILLS (Skills/Equipment Operated)

T	C1-1	Production/Mobile	Other (list)
erminal	Spreadsheet	Machinery (list)	Other (list)
PC/MAC	Word Processing		
ypewriter	Shorthand		
WPM	WPM		

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. NO

# PERSONAL/PROFESSIONAL REFERENCES Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.	্ নিজ্ঞান এক স্থানিক ইয়াই ইয়াই জিল্পান স্থানিক		

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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	Signature of Applicant		Date	

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